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| Substitute for form 1449B/PTO     | Complete if Known      |                               |  |
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| INCORPORATION DIGGS OF THE        | Application Number     | 09/774,354                    |  |
| INFORMATION DISCLOSURE            | Filing Date            | January 30, 2001              |  |
| STATEMENT BY APPLICANT            | First Named Inventor   | Paul J. Rank                  |  |
| JUN 2 4 2003 =                    | Group Art Unit         | 2176                          |  |
| (use as many sheets as necessary) | Examiner Name          | Heather R. Herndon            |  |
| Sheet 1 of 1                      | Attorney Docket Number | 30014200.1080/P5375NP/<br>JLM |  |

|          | OTHER ITEMS - NON PATENT LITERATURE DOCUMENTS   |                          |                       |
|----------|---|--------------------------|-----------------------|
| Т        | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue rumber(s), publisher, city and/or country where published. | Cite<br>No. <sup>1</sup> | Examiner<br>Initials* |
|          | DAVID W. BYNON, "VAX XWAY," DEC PROFESSIONAL, September 1987, Philadelphia, PA, Vol. 6, Nr. 9, pages 108 and 110, XP000747272.  |                          | MK                    |
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| Examiner Markhanhagulen | Date<br>Considered | 11/12/024 |
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<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>&</sup>lt;sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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|------------------------|-------------------------------|--|--|--|
| Application Number     | 09/774,354                    |  |  |  |
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| First Named Inventor   | Paul J. Rank                  |  |  |  |
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| Examiner Name          | Heather R. Herndon            |  |  |  |
| Attorney Docket Number | 30014200.1080/P5375NP/<br>JLM |  |  |  |

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|--------------------------|----------|-------------|-----------------------------------|---|-------------------------------|--|
| Examiner Ci<br>Initials* | CiteNo.1 | Number      | Kind Code <sup>2</sup> (if known) |   |                               |  |
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| Examiner Initials* Cit Foreign eN o.1 Office3 | Foreign Patent Document Kind Code |                   |  | Name of Patentee or Applicant of Cited | Date of Publication of Cited Document | Pages, Columns,<br>Lines, Where Relevant<br>Passages or Relevant   | 76   |
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|   | WO                                | 98/36344          |  | LEXTRON SYSTEMS, INC.                  | 08-20-1998                            |  |  |
|   | EP                                | 0 924 611 A       | 2                                      | TEXAS INSTRUMENTS INCORPORATED         | 06-23-1999                            |  |  |
|   |                                   |                   |  |  |                                       |  |  |
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| <del> </del>                                  |                                   |                   |  |  |                                       |  |  |
|   | eN                                | eN<br>o.¹ Office³ | eN o.1 Office3 Number4 (i) WO 98/36344 | Cit eN   String   Code                 | Name of Patentee   Name of Patentee   | Name of Patentee   Publication of Cited Document   Name of Patentee   Name of Patentee   Publication of Cited Document   Name of Patentee   Name of P | Cit eN o.1 Office3 Number4 (if known) Name of Patentee or Applicant of Cited Document MM-DD-YYYY  WO 98/36344 LEXTRON SYSTEMS, INC.  EP 0 924 611 A2 TEXAS INSTRUMENTS  Date of Publication of Cited Document MM-DD-YYYY Passages or Relevant Figures Appear  O8-20-1998  O6-23-1999 |

| Signature   Considered | Examiner Signature | Markhanhnquyen | Date V/12 / 024 |  |
|------------------------|--------------------|----------------|-----------------|--|
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